

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

Principal Life Insurance Company Political Action Committee

ADDRESS (number and street)

711 High St.

Government Relations

☐Check if different
than previously
reported. (ACC)

Des Moines

IA

50392

0220

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00128918

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Merle T. Pederson

Signature of Treasurer

Electronically Filed by Merle T. Pederson

Date

08

13

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		26325.17
(b) Cash on Hand at Beginning of Reporting Period	22040.13	
(c) Total Receipts (from Line 19)	16546.60	95011.56
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	38586.73	121336.73
7. Total Disbursements (from Line 31)	24500.00	107250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14086.73	14086.73
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10245.00	37880.89
(i) Itemized (use Schedule A)	6301.60	57130.67
(ii) Unitemized	16546.60	95011.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	16546.60	95011.56
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	16546.60	95011.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16546.60	95011.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	87750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	11000.00	19500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	24500.00	107250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24500.00	107250.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16546.60	95011.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16546.60	95011.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Craig L. Bassett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14431

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Craig L. Bassett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.42

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14430

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Michael J. Beer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14455

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

98.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael J. Beer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14454

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Louise A. Billmeyer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - Health IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14479

Amount of Each Receipt this Period

39.00

C.

Full Name (Last, First, Middle Initial)

Louise A. Billmeyer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - Health IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14480

Amount of Each Receipt this Period

39.00

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kim M. Blaugher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14494

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kim M. Blaugher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14493

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Asst Fed Leg Dir-Fed Gov't Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14501

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Asst Fed Leg Dir-Fed Gov't Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14502

Amount of Each Receipt this Period

44.00

B.

Full Name (Last, First, Middle Initial)

Christopher J. Bowman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14515

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Christopher J. Bowman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14516

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

144.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

David J. Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP, Product & Distrib Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.40

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14539

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

David J. Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP, Product & Distrib Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.40

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14540

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Paul A. Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Institutional Mkt Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14545

Amount of Each Receipt this Period

39.00

SUBTOTAL of Receipts This Page (optional)

102.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Paul A. Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Institutional Mkt Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14546

Amount of Each Receipt this Period

39.00

B.

Full Name (Last, First, Middle Initial)

Ned A. Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

VP, CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14573

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ned A. Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

VP, CFO & Risk Mgr-Prin Intrn'l

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14574

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

139.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Thomas L. Burnor

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14576

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

Thomas L. Burnor

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP of Sales - Retirement Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14575

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

Gregory J. Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14579

Amount of Each Receipt this Period

57.69

SUBTOTAL of Receipts This Page (optional)

115.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gregory J. Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14580

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

Chris T. Calos

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Group Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14594

Amount of Each Receipt this Period

31.85

C.

Full Name (Last, First, Middle Initial)

Chris T. Calos

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Group Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14593

Amount of Each Receipt this Period

31.85

SUBTOTAL of Receipts This Page (optional)

121.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Nicholas M. Cecere

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Career Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14599

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Nicholas M. Cecere

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Career Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14600

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)

Lillian I. Chen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14603

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

108.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lillian I. Chen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14604

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Barrie G. Christman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14612

Amount of Each Receipt this Period

38.47

C.

Full Name (Last, First, Middle Initial)

Barrie G. Christman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14611

Amount of Each Receipt this Period

38.47

SUBTOTAL of Receipts This Page (optional)

108.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14695

Amount of Each Receipt this Period

65.00

B.

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14696

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

Gary L. Dorton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14728

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

161.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gary L. Dorton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Employer Solutions & Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14727

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Timothy M. Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.82

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14738

Amount of Each Receipt this Period

63.46

C.

Full Name (Last, First, Middle Initial)

Timothy M. Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.82

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14737

Amount of Each Receipt this Period

63.46

SUBTOTAL of Receipts This Page (optional)

158.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gregory B. Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14760

Amount of Each Receipt this Period

64.00

B.

Full Name (Last, First, Middle Initial)

Gregory B. Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14759

Amount of Each Receipt this Period

64.00

C.

Full Name (Last, First, Middle Initial)

Ralph C. Eucher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Human Resources & Ris

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14765

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

153.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ralph C. Eucher

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Human Resources & Ris

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14766

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Nora M. Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.46

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14772

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Nora M. Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.46

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14771

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Douglas A. Fick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP - Sbd IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14784

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Douglas A. Fick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP - Sbd IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14783

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Michael P. Finnegan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP & Chief Invest Officer- Pmc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.38

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14789

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

96.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael P. Finnegan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Chief Invest Officer- Pmc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.38

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14790

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Jed A. Fisk

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Corp Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.20

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14792

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

Jed A. Fisk

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Corp Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.20

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14791

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)

89.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Brent Fritz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Actuary-Individual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14844

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Brent Fritz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Actuary-Individual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14843

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Paul E. Fromm

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP Marketing- Ris

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14852

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

82.71

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Paul E. Fromm

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP Marketing- Ris

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14851

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Cary A. Fuchs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Director-Mutual Fund Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14854

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Cary A. Fuchs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Director-Mutual Fund Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14853

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

59.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael H. Gersie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec VP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14873

Amount of Each Receipt this Period

80.00

B.

Full Name (Last, First, Middle Initial)

Michael H. Gersie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec VP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14874

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

Thomas J. Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14903

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Thomas J. Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Investor Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14904

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Human Resources

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14910

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lynn M. Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Human Resources

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14909

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Steven K. Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14911

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Steven K. Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-Real Estate Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14912

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Victoria I. Gray

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14914

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

139.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Victoria I. Gray

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14913

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

J. B. Griswell

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14917

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

J. B. Griswell

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14918

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)

459.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Douglas E. Grove

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - Nat'l Sales Dir Ret Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14922

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Douglas E. Grove

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - Nat'l Sales Dir Ret Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14921

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Patrick G. Halter

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Head of Prinrei

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.14

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14936

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

101.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Patrick G. Halter

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Head of Prinrei

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.14

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14935

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Loraine N. Hardin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Insured Medical Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14950

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Loraine N. Hardin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Insured Medical Products

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14951

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

101.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Monica L. Haun

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
2nd VP-IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14965

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Monica L. Haun

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
2nd VP-IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 14964

Amount of Each Receipt this Period

19.23

C.

Full Name (Last, First, Middle Initial)

Christopher J. Henderson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.85

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14986

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

70.46

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Christopher J. Henderson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: 14987

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Timothy A. Hill

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

National Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: 14999

Amount of Each Receipt this Period

18.00

C.

Full Name (Last, First, Middle Initial)

Timothy A. Hill

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

National Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: 14998

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

68.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jill M. Hittner

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chief Financial Officer-Pgi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.94

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15003

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15009

Amount of Each Receipt this Period

63.46

C.

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15008

Amount of Each Receipt this Period

63.46

SUBTOTAL of Receipts This Page (optional)

158.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Dennis J. Holland

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Special Mkt Developer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 8

Transaction ID: 15012

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Daniel J. Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

EVP Retirement & Investor Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1323.92

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15031

Amount of Each Receipt this Period

117.00

C.

Full Name (Last, First, Middle Initial)

Daniel J. Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

EVP Retirement & Investor Svc

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1323.92

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15032

Amount of Each Receipt this Period

117.00

SUBTOTAL of Receipts This Page (optional)

284.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

G. D. Hurd

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Unevaluated Sr VP & Above

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: 14363

Amount of Each Receipt this Period

500.00

Lump Sum Receipt

B.

Full Name (Last, First, Middle Initial)

Bradley G. Jensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Chief Financial Officer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: 15059

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Bradley G. Jensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Chief Financial Officer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

412.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: 15058

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

563.48

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Carey G. Jury

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: 15077

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Carey G. Jury

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: 15076

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Clifford P. Karthauser

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: 15096

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Monica J. Kirgan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-National Service Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15114

Amount of Each Receipt this Period

36.00

B.

Full Name (Last, First, Middle Initial)

Monica J. Kirgan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-National Service Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.98

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15113

Amount of Each Receipt this Period

36.00

C.

Full Name (Last, First, Middle Initial)

Timothy W. Knott

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Spec Benefits Prod & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15119

Amount of Each Receipt this Period

31.75

SUBTOTAL of Receipts This Page (optional)

103.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Timothy W. Knott

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Spec Benefits Prod & Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.75

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15120

Amount of Each Receipt this Period

31.75

B.

Full Name (Last, First, Middle Initial)

Peter R. Kornweiss

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Preferred Product Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.50

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15129

Amount of Each Receipt this Period

27.50

C.

Full Name (Last, First, Middle Initial)

Ellen Z. Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15146

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

129.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ellen Z. Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Risk Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15147

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15160

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

715.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15161

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Richard C. Lawson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15163

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Richard C. Lawson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15162

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)

Scott P. Leiberton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15168

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

96.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Scott P. Leiberton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-Product Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15169

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Terrance J. Lillis

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15181

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Terrance J. Lillis

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15180

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gregory A. Linde

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Individual Life Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	0	8

Transaction ID: 15185

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Gregory A. Linde

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Individual Life Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	7	/	2	0	0	8

Transaction ID: 15184

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Dennis J. Long

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Vice President- Pcg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	0	8

Transaction ID: 15188

Amount of Each Receipt this Period

38.46

SUBTOTAL of Receipts This Page (optional)

88.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Dennis J. Long

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Vice President- Pcg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15189

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Chris L. Mayer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Defined Benefit & Ret Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15216

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Chris L. Mayer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Defined Benefit & Ret Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15217

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

102.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James P. McCaughan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President Global Asset Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15224

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)

James P. McCaughan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President Global Asset Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15225

Amount of Each Receipt this Period

192.30

C.

Full Name (Last, First, Middle Initial)

Daniel J. McGee

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Managing Dir, Ris Distrib

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15233

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

424.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel J. McGee

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Managing Dir, Ris Distrib

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15232

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Barbara A. McKenzie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chief Operations Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15238

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Barbara A. McKenzie

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chief Operations Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15239

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

104.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Arthur McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.31

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15243

Amount of Each Receipt this Period

23.87

B.

Full Name (Last, First, Middle Initial)

Arthur McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.31

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15242

Amount of Each Receipt this Period

23.87

C.

Full Name (Last, First, Middle Initial)

Shelly M. Meighan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Dir - Career Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15248

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

72.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Shelly M. Meighan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Dir - Career Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15249

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Amy J. Mills

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15265

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)

Amy J. Mills

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15264

Amount of Each Receipt this Period

38.46

SUBTOTAL of Receipts This Page (optional)

101.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Timothy J. Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15267

Amount of Each Receipt this Period

65.00

B.

Full Name (Last, First, Middle Initial)

Timothy J. Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Retirement Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15266

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

Jacque S. Mohs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Dynamic Market Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15280

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

162.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jacque S. Mohs

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Dynamic Market Segment

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15281

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Leslie Mudd

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Financial Group

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15299

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

Leslie Mudd

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Financial Group

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15298

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)

89.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John Mullen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Principal Funds Distr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15302

Amount of Each Receipt this Period

21.00

B.

Full Name (Last, First, Middle Initial)

John Mullen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Principal Funds Distr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15303

Amount of Each Receipt this Period

21.00

C.

Full Name (Last, First, Middle Initial)

Mary A. O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Marketing Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15340

Amount of Each Receipt this Period

44.23

SUBTOTAL of Receipts This Page (optional)

86.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mary A. O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15339

Amount of Each Receipt this Period

44.23

B.

Full Name (Last, First, Middle Initial)

William G. Papesh

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chief Operations Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 5 / 2 0 0 8

Transaction ID: 14370

Amount of Each Receipt this Period

1000.00

Lump Sum Receipt

C.

Full Name (Last, First, Middle Initial)

Gerald W. Patterson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Marketing Life & Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15361

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)

1073.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gerald W. Patterson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Marketing Life & Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15360

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

Karen Pearston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.18

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15368

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Karen Pearston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.18

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15369

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

92.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Merle T. Pederson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15372

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Merle T. Pederson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15373

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Peter J. Prodoehl

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15414

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)

83.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Peter J. Prodoehl

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15415

Amount of Each Receipt this Period

19.23

B.

Full Name (Last, First, Middle Initial)

Jeffrey K. Rader

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Head of Financial Communicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15427

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Christopher J. Reddy

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP (Pen Admin)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.27

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15442

Amount of Each Receipt this Period

23.79

SUBTOTAL of Receipts This Page (optional)

59.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Christopher J. Reddy

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd VP (Pen Admin)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.27

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15443

Amount of Each Receipt this Period

23.79

B.

Full Name (Last, First, Middle Initial)

R. L. Riddle

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15468

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

R. L. Riddle

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15469

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

123.79

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 86

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael D. Roughton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: 15485

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Michael D. Roughton

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

Transaction ID: 15486

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Angela R. Sanders

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd Vice President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Transaction ID: 15504

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Angela R. Sanders

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

2nd Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15505

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Renee V. Schaaf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Ris Mktg & Strategy Dvlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.24

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15517

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Renee V. Schaaf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Ris Mktg & Strategy Dvlpmnt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.24

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15516

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John D. Schmidt

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15530

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

John D. Schmidt

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15531

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Gary P. Scholten

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15539

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

125.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gary P. Scholten

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15538

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Edward M. Schuh

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Investment Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15544

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)

Karen E. Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15558

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

171.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Karen E. Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec VP & General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15557

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

Daniel J. Shanahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Regional Managing Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15559

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Daniel J. Shanahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Regional Managing Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: 15560

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Martha C. Shepard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & General Auditor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15561

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Martha C. Shepard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & General Auditor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15562

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)

Laurel J. Shultz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Emerging Mkt Segment

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15568

Amount of Each Receipt this Period

33.00

SUBTOTAL of Receipts This Page (optional)

109.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Laurel J. Shultz

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Emerging Mkt Segment

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15567

Amount of Each Receipt this Period

33.00

B.

Full Name (Last, First, Middle Initial)

Ellen W. Shumway

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Director- Affiliate Op

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15570

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Ellen W. Shumway

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Director- Affiliate Op

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15569

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

97.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Tom Smith

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15586

Amount of Each Receipt this Period

28.85

B.

Full Name (Last, First, Middle Initial)

Tom Smith

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.05

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15585

Amount of Each Receipt this Period

28.85

C.

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

Exec VP Int'l Asset Accum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15591

Amount of Each Receipt this Period

76.92

SUBTOTAL of Receipts This Page (optional)

134.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

Exec VP Int'l Asset Accum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15592

Amount of Each Receipt this Period

76.92

B.

Full Name (Last, First, Middle Initial)

Deanna D. Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15621

Amount of Each Receipt this Period

63.46

C.

Full Name (Last, First, Middle Initial)

Deanna D. Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15622

Amount of Each Receipt this Period

63.46

SUBTOTAL of Receipts This Page (optional)

203.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Timothy E. Stumpff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Network Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15627

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Timothy E. Stumpff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Network Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.40

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15628

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Karen S. Thomann

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & CIO- Retire Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.47

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15662

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

95.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Karen S. Thomann

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & CIO- Retire Investor Svcs

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.47

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15661

Amount of Each Receipt this Period

31.74

B.

Full Name (Last, First, Middle Initial)

Leanne M. Valentine

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.66

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15697

Amount of Each Receipt this Period

31.74

C.

Full Name (Last, First, Middle Initial)

Leanne M. Valentine

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.66

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15698

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

95.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Luke J. Vandermillen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Natl Sales Dir-Worksite Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15714

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Luke J. Vandermillen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Natl Sales Dir-Worksite Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15713

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Maria E. Volante

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Natl Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15725

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

102.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Maria E. Volante

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Natl Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15726

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)

Richard W. Waugh

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-Credit Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 14368

Amount of Each Receipt this Period

225.00

Lump Sum Receipt

C.

Full Name (Last, First, Middle Initial)

Hugh White

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15779

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

277.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Hugh White

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Vice President-Grp Non Med

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15778

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Steven C. Whitty

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15782

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Steven C. Whitty

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15783

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

William Workman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-IT Life & Disability

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15810

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

William Workman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-IT Life & Disability

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15809

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)

Larry D. Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2199.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 0 8

Transaction ID: 15826

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional)

246.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 86

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Larry D. Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President & CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2199.99

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 8

Transaction ID: 15825

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional)

169.23

TOTAL This Period (last page this line number only)

10245.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Barney Frank for Congress Committee	Transaction ID: 98362-7593347430229 Date of Disbursement																				
Mailing Address PO Box 260	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Newtonville State MA Zip Code 02460	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name Barney Frank	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Braley for Congress	Transaction ID: 98362-2086603045463 Date of Disbursement																				
Mailing Address PO Box 390	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Waterloo State IA Zip Code 50704	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name Bruce Braley	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress	Transaction ID: 98362-3487512469291 Date of Disbursement																				
Mailing Address PO Box 9336	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	0	8												
City Fargo State ND Zip Code 58106	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name Earl Pomeroy	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Ed Royce for Congress	Transaction ID: 98362-1677209734916 Date of Disbursement																				
Mailing Address PO Box 2525	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Orange State CA Zip Code 92859	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Edward R. Royce	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Ellen Tauscher for Congress	Transaction ID: 98362-0460016131401 Date of Disbursement																				
Mailing Address 20 Park Road, Suite E Suite E	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	0	8												
City Burlingame State CA Zip Code 94010	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Ellen O. Tauscher	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Friends for Gregory Meeks	Transaction ID: 98362-8436395525932 Date of Disbursement																				
Mailing Address 153-01 Jamaica Ave. Suite 535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Jamaica State NY Zip Code 11432	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Gregory W. Meeks	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends of Gordon Smith

Mailing Address 228 S Washington Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contribution

Candidate Name
Gordon H. Smith

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: OR District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 98362-2638513445854

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Grassley Committee Inc

Mailing Address PO Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
Contribution

Candidate Name
Charles E. Grassley

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: IA District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 98362-9866907000541

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Lee Terry for Congress

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement
Contribution

Candidate Name
Lee Terry

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NE District: 02

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 98362-0796167254447

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Nelson 2012	Transaction ID: 98362-5374872088432 Date of Disbursement																				
Mailing Address PO Box 8666	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Omaha State NE Zip Code 68108	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Ben Nelson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Real Estate Roundtable Political Action Committee (Real-pac)	Transaction ID: 98362-2052118182182 Date of Disbursement																				
Mailing Address 801 Pennsylvania Avenue Suite 720	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Tim Johnson for South Dakota Inc	Transaction ID: 98362-3083459734916 Date of Disbursement																				
Mailing Address PO Box 1536	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	7		2	0	0	8												
City Sioux Falls State SD Zip Code 57101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Tim Johnson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>4500.00</td> </tr> </table>	4500.00																			
4500.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td>13500.00</td> </tr> </table>	13500.00																			
13500.00																					

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Behn for Senate	Transaction ID: 88885-0946313738822 Date of Disbursement																				
Mailing Address 1313 Quill Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
City Boone State IA Zip Code 50036	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	011																				
B. Full Name (Last, First, Middle Initial) Citizens to Re-Elect Wayne Ford	Transaction ID: 98362-1458246111869 Date of Disbursement																				
Mailing Address P.O. Box 5042	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City Des Moines State IA Zip Code 50306-5042	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	011																				
C. Full Name (Last, First, Middle Initial) Committee to Elect Steve Lukan	Transaction ID: 76710-8084985613823 Date of Disbursement																				
Mailing Address 7365 Columbus Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	8												
City New Vienna State IA Zip Code 52065	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type	011																				

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Concerned Citizens for Miller

Mailing Address 6766 Ridges Court

City
Bettendorf

State
IA

Zip Code
52722

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 98362-7999688982963

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Courtney for State Senate Committee

Mailing Address 2200 Summer Street

City
Burlington

State
IA

Zip Code
52601

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 76710-2141992449760

Date of Disbursement

06 / 09 / 2008

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Danielson for Senate

Mailing Address 3906 Monterey Drive

City
Waterloo

State
IA

Zip Code
50701-3527

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 76710-5466577410697

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Frank Wood for Senate	Transaction ID: 76710-5805932879447 Date of Disbursement																				
Mailing Address P.O. Box 402	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	8												
City Eldridge State IA Zip Code 52748	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Hancock for Senate	Transaction ID: 76710-3720514178276 Date of Disbursement																				
Mailing Address 310 E. Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	8												
City Epworth State IA Zip Code 52045	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Heckroth for Senate	Transaction ID: 76710-5717279314994 Date of Disbursement																				
Mailing Address 416 West Bremer Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	8												
City Waverly State IA Zip Code 50677	Amount of Each Disbursement this Period																				
Purpose of Disbursement Nonfederal Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Horbach for House of Representatives	Transaction ID: 52038-3241388201713 Date of Disbursement
Mailing Address 1014 Oakland Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 6 / 2 0 0 8</div> </div>
City Tama State IA Zip Code 52339	Amount of Each Disbursement this Period <div>250.00</div>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Huser for State Representative	Transaction ID: 52038-3599206805229 Date of Disbursement
Mailing Address 213 7th Street NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Altoona State IA Zip Code 50009	Amount of Each Disbursement this Period <div>500.00</div>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Iowans for Van Fossen	Transaction ID: 52038-0979272723197 Date of Disbursement
Mailing Address 2802 Middle Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>
City Davenport State IA Zip Code 52803	Amount of Each Disbursement this Period <div>250.00</div>
Purpose of Disbursement Nonfederal Contribution Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jacoby for House

Mailing Address 2308 Northridge Drive

City State Zip Code
Coralville IA 52241

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 52038-4816400408744

Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kettering Campaign

Mailing Address 272 Crescent Park Drive

City State Zip Code
Lake View IA 51450

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 52038-2193414568901

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mark Zieman for Senate Committee

Mailing Address 284 Luana Road

City State Zip Code
Postville IA 52162

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 52038-2941552996635

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ►

750.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Murphy for State Representative

Mailing Address 155 North Grandview Avenue

City State Zip Code
Dubuque IA 52001-6325

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71672-3283655047416

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
Nancy Boettger for State Senate Committee

Mailing Address 926 Ironwood Road

City State Zip Code
Harlan IA 51537

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71672-2423059344291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Neighbors for Hatch

Mailing Address 1623 Woodland Avenue

City State Zip Code
Des Moines IA 50309

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71672-2611657977104

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Oldson for State Representative	Transaction ID: 71672-9911462664604 Date of Disbursement																				
Mailing Address 418 38th Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	2		2	0	0	8												
<table border="1"> <tr> <td>City Des Moines</td> <td>State IA</td> <td>Zip Code 50312</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Nonfederal Contribution</td> <td rowspan="2"> <div>011</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Des Moines	State IA	Zip Code 50312	Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>500.00</div>												
City Des Moines	State IA	Zip Code 50312																			
Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
B. Full Name (Last, First, Middle Initial) Olive the Supporters of Rich for Senate	Transaction ID: 71672-0881311297416 Date of Disbursement																				
Mailing Address 1264 Northridge Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	0	8												
<table border="1"> <tr> <td>City Story City</td> <td>State IA</td> <td>Zip Code 50248-0247</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Nonfederal Contribution</td> <td rowspan="2"> <div>011</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Story City	State IA	Zip Code 50248-0247	Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>250.00</div>												
City Story City	State IA	Zip Code 50248-0247																			
Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
C. Full Name (Last, First, Middle Initial) Petersen for State Representative	Transaction ID: 71672-1412469744682 Date of Disbursement																				
Mailing Address 1346 47th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	2		2	0	0	8												
<table border="1"> <tr> <td>City Des Moines</td> <td>State IA</td> <td>Zip Code 50311</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Nonfederal Contribution</td> <td rowspan="2"> <div>011</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Des Moines	State IA	Zip Code 50311	Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>500.00</div>												
City Des Moines	State IA	Zip Code 50311																			
Purpose of Disbursement Nonfederal Contribution		<div>011</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Pettengill for Iowans Mailing Address P.O. Box 76	Transaction ID: 71672-4112970232963 Date of Disbursement <div> <div>06</div> <div>03</div> <div>2008</div> </div>
City State Zip Code Mt. Auburn IA 52313 Purpose of Disbursement Nonfederal Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>250.00</div>
B. Full Name (Last, First, Middle Initial) Raecker for State Representative Committee Mailing Address 9011 Iltis Drive City State Zip Code Urbandale IA 50322 Purpose of Disbursement Nonfederal Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71672-3999139666557 Date of Disbursement <div> <div>06</div> <div>19</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>250.00</div>
C. Full Name (Last, First, Middle Initial) Rants for State House Mailing Address 2740 South Glass Street City State Zip Code Sioux City IA 51106 Purpose of Disbursement Nonfederal Contribution Candidate Name <div> <div>011</div> <div>Category/Type</div> </div> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 71672-3520166277885 Date of Disbursement <div> <div>06</div> <div>04</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>500.00</div>

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Reasoner for State Representative

Mailing Address 702 New York Avenue

City
Creston

State
IA

Zip Code
50801

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-6275445818901

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rielly for Senate

Mailing Address 113 North Market Street

City
Oskaloosa

State
IA

Zip Code
52577

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-3485986590385

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sands for State House

Mailing Address 134 Orchard Lane

City
Columbus Junction

State
IA

Zip Code
52738

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-8301050066948

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 84 / 86

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Soderberg for House

Mailing Address 800 2nd Street SE

City
LeMars

State
IA

Zip Code
51031

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-4792138934135

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Steve Olson for State Representative

Mailing Address 2176 210th Street

City
Grand Mound

State
IA

Zip Code
52751

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-5149194598197

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Tymeson for House

Mailing Address 1524 Highway 169

City
Winterset

State
IA

Zip Code
50273

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71672-0239526629447

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ward for Senate

Mailing Address 1545 Glen Oaks Drive

City State Zip Code
West Des Moines IA 50266Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71672-6296045184135

Date of Disbursement

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 8

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Zaun for Iowa Senate

Mailing Address 7032 Holcomb Avenue

City State Zip Code
Urbandale IA 50322Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71672-0891229510307

Date of Disbursement

M M / D D / Y Y Y Y
0 6 / 1 8 / 2 0 0 8

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ►

500.00

TOTAL This Period (last page this line number only) ►

11000.00

Image# 28932436939

Form/Schedule: **F3X**

Transaction ID:
